

Clinical trial on 22 cases of allergic rhinopathy, following the exposure to the microclimate made by the "SALIN" device

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The "SALIN" device offers, beside the known treatments, a new method in the therapy of chronic inflammatory diseases, of the respiratory system.

The Na ion is recognized, both in the reference material and by most of the clinicians, as the main cellular membrane stabilizer of the respiratory epithelium. In the presence of Na ion, it can be noticed an increase in the volume of lung surface liquids. Also the ciliary motility is activated, even in chronic smokers, whose ciliary movement is impaired, inducing a fast clearance of the respiratory secretions.



The Na ion causes the lowering of oropharyngeal airway edema soft palate, posterior portion of the tongue, often met in chronic snoring. The inflammatory edema that causes sinus ostial obstruction also decreases, leading to the sinus drainage.

These findings are the basis of clinical directions of aerosoltherapy and balneotherapy in different chronic respiratory disease. The "SALIN" device tries to achieve an atmosphere resembling to the atmosphere of the salt mines sanatoriums.

Having at our disposal 22 "SALIN" devices, we recommended a minimum 3 hours a day exposure (on an average of 6 hours) for 3 months to 22 patients with chronic allergic rhinopathy. All these patients were polyallergic but the house dust was met as an incriminated allergen in all of them, without other prevalent diseases.

Their age was between 22 and 53 years old, 15 women and 7 men.

The exposure was made without giving up the antiallergic treatment prescribed by their physicians.

The following signs and symptoms were noticed:

- Nasal obstruction
- Headache
- Rhinorrhea



- Sneezing
- Cough
- Dry throat sensation
- The quality of night sleep
- The quality of sputum

In 13 patients from those previously mentioned, we also examined:

- The edema of uvula
- Aelangiectasias of the posterior portion of the tongue
- The aspect of pituitary gland

Results and discussions

We noticed that women are more conscientious in following the treatment.

The quality of sleep was evidently improved in all the studied patients by night exposure to "SALIN".

The nasal obstruction and sneezing were evidently improved in 18 patients representing 81.8 %.

Seromucous rhinorrhea got thicker and more voluminous, in only one case rhinorrhea remained.

Headache as a syndrome was noticed initially in 12 of patients. For half of them the exposure had a favorable result.

Cough was, in general more efficient and wet, the effort for removing the sputum decreased and the sputum got more fluid. The benefit effect was immediately noticed at 7 patients, chronic smokers.

The dry throat sensation was diminished in a better or smaller degree at all the patients.

At the clinic exam of the 13 cases mentioned forward, we noticed the lowering of the edema soft palate after maximum 10 days.

Conclusions

1. The Salin device brings back in present the Na ion as the main cellular stabilizer of the respiratory epithelium.
2. The Salin device represents a convenient alternative of marine aerosols therapy or halotherapy of the saline sanatoriums.
3. The Salin device represents a useful help in the treatment of chronic affections of the superior respiratory ways as:
 - Allergic rhinopaties
 - Chronic sinusitis
 - Chronic rhinitis.

